

DALY, CROWLEY, MOFFORD & DURKEE, LLP

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Date: December 14, 2005

To: Commissioner for Patents**From: Paul D. Durkee, Esq.****Examiner: Nelson D. Hernandez****Group Art: 2612****Company: U.S. PTO****Facsimile Number: 571-273-8300****Telephone Number:****MESSAGE**

RE: U.S. Patent Application of Jonathan Weintroub, et al.
Entitled: METHOD AND APPARATUS FOR DETECTING OPTIMUM LENS FOCUS POSITION
Filed on: December 21, 2001
U.S. Appl. No.: 10/034,295
Our Ref. No.: FLEX-002PUS

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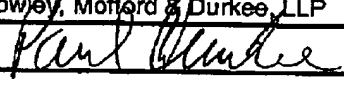
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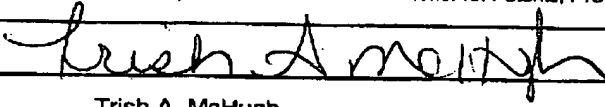
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/034,295	
	Filing Date	December 21, 2001	
	First Named Inventor	Jonathan Weintroub	
	Art Unit	2612	
	Examiner Name	Nelson D. Hernandez	
Total Number of Pages in This Submission	14	Attorney Docket Number	FLEX-002PUS

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (Preliminary) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC Appeal Notice, Brief, Reply Brief <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks In the event a petition for extension of time is required by this paper and not otherwise provided, such petition is hereby made and authorization is provided herewith to charge deposit account No. 50-0845 for the cost of such extension.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Daly, Crowley, Mottard & Durkee, LLP	
Signature	 USPTO Customer No. 022494	
Printed name	Paul D. Durkee	
Date	14 Dec 05	Reg. No. 41,003

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Trish A. McHugh	Date 12-14-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$) **1,020****Complete if Known**

Application Number	10/034,295
Filing Date	December 21, 2001
First Named Inventor	Jonathan Weintroub
Examiner Name	Nelson D. Hernandez
Art Unit	2612
Attorney Docket No.	FLEX-002PUS

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: **50-0845** Deposit Account Name: **Daly, Crowley, Mottford & Durkee, LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims 20 or HP = 0 x 0 = 0 **Fee Paid (\$)** 0

HP = highest number of total claims paid for, if greater than 20

Indep. Claims 3 or HP = 0 x 0 = 0 **Fee Paid (\$)** 0

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets 0 **Extra Sheets** 0 **Number of each additional 50 or fraction thereof** 0 **Fee (\$)** 0 **Fee Paid (\$)** 0

0 - 100 = 0 / 50 = 0 (round up to a whole number) x 0 = 0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: PTO Three Month Extension

Fees Paid (\$)

0

1020

SUBMITTED BY

Signature

Registration No.
(Attorney/Agent)

41,003

Telephone 781.401.9988 ext. 21

Name (Print/Type)

Paul D. Durkee

Date

14 Dec 05

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